

1. State of South Carolina
2. Separate plates for each child
3. Mark the
4. Birth date
5. The other, No. 2, etc., in question 5.
6. Registrar, Columbia, S. C.

(1) PLACE OF BIRTH		CERTIFICATE OF BIRTH		File No.—For State Registrar Only	
County of <u>Bamberg</u>		STATE OF SOUTH CAROLINA		264	
Township of		Bureau of Vital Statistics			
Inc. Town of <u>Bamberg</u>		State Board of Health			
City of		Registration District No. <u>4-A</u>		Registered No. <u>4</u>	
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)		(No. St. Ward)		(For use of Local Registrar)	
(2) Full Name of Child <u>Margaret Elizabeth Perry</u> child is not yet named, make supplemental report as directed					
(3) BOY OR GIRL <u>girl</u>	(4) Twin or Triplet?	(5) Number in order of birth	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>Jan. 28, 1927</u> (Name of Month) (Day) (Year)	
FATHER			MOTHER		
(8) FULL NAME <u>Bryan Perry</u>			(14) NAME BEFORE MARRIAGE <u>Elizabeth Perry</u>		
(9) PRESENT POSTOFFICE OF FATHER <u>Bamberg SC</u>			(15) PRESENT POSTOFFICE OF MOTHER <u>Bamberg SC</u>		
(10) COLOR OR RACE <u>Col</u>			(16) COLOR OR RACE <u>Col</u>		
(11) AGE AT LAST BIRTHDAY			(17) AGE AT LAST BIRTHDAY		
(12) BIRTHPLACE <u>SC</u>			(18) BIRTHPLACE <u>SC</u>		
(13) OCCUPATION <u>Blackman RR</u>			(19) OCCUPATION		
(20) Number of children born to mother, including present birth <u>1</u>			(21) Number of children of this mother now living, including present birth <u>1</u>		
CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE					
(22) I hereby certify that I attended the birth of this child, who was <u>Abel</u> at <u>5 A.</u> on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)					
(23) (Signature) <u>John Jones</u>					
(24) State whether Physician or Midwife <u>Midwife</u> (25) Address of Physician or Midwife <u>Bamberg SC</u>					
Given name added from a supplemental report			(26) Witness		
..... 19			(27) Filed <u>76</u> 19 <u>27</u>		
Registrar			Local Registrar		
*When there was no attending physician or midwife, then the father, householder, etc. should make this return. If a child breathes even once, it must not be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.					